



APPLICATION DATA SHEET

Application Information

Application Number:: 10/675482
Filing Date:: 09/30/03
Application Type:: Regular
Subject Matter:: Utility
CD-ROM or CD-R?:: None
Title Line One:: Internal Rear-View Mirror For Motor Vehicles
Attorney Docket Number:: SCH-00077
Request for Early Publication:: No
Request for Non-Publication:: No
Suggested Drawing Figure:: 1
Total Drawing Sheets:: 3
Small Entity:: No
Petition Included?:: No
Secrecy Order in Parent Appl?:: No

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: DE
Status:: Full capacity
Given Name:: Andreas
Family Name:: Heim
City of Residence:: Esslingen
Country of Residence:: DE
Street of mailing address:: Hellerweg 26/3
City of mailing address:: Esslingen
Country of mailing address:: DE

Postal or Zip Code of
mailing address: 73728

Applicant Authority Type:: Inventor
Primary Citizenship Country:: DE
Status:: Full capacity
Given Name:: Werner
Family Name:: Stuffle
City of Residence:: Remseck
Country of Residence: DE
Street of mailing address:: Martin-Buber-Weg 21
City of mailing address:: Remseck
Country of mailing address:: DE
Postal or Zip Code of
mailing address: 71686

~~Applicant Authority Type:: Inventor~~
~~Primary Citizenship Country:: US~~
~~Status:: Full capacity~~
~~Given Name:: Michael~~
~~Family Name:: Rosen~~
~~City of Residence:: Newtonville~~
~~State or Province~~
~~of Residence:: MA~~
~~Country of Residence: US~~
~~Street of mailing address:: 58 Highland Avenue~~
~~City of mailing address:: Newtonville~~
~~State or Province of~~
~~mailing address:: MA~~

~~Country of mailing address::~~ US
~~Postal or Zip Code of~~
~~mailing address::~~ 02460

~~Applicant Authority Type::~~ Inventor
~~Primary Citizenship Country::~~ US
~~Status::~~ Full capacity
~~Given Name::~~ Hal
~~Family Name::~~ Greenberger
~~City of Residence::~~ Milford
~~State or Province~~
~~of Residence::~~ MA

~~Country of Residence:~~ US
~~Street of mailing address::~~ 51 Haven Street
~~City of mailing address::~~ Milford
~~State or Province of~~
~~mailing address::~~ MA

~~Country of mailing address::~~ US
~~Postal or Zip Code of~~
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Correspondence Information

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Representative Information

Representative Designation::	Registration Number::	Representative Name::
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Associate	33362	Joseph G. Burgess
Associate	33711	Richard W. Hoffmann
Associate	37167	Douglas P. LaLone
Associate	53425	Gregory L. Ozga

Foreign Priority Applications

Country::	Application Number::	Filing Date::	Priority Claimed::
Germany	102 46 585.1	10/05/02	Yes